

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	12/12/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		71471	7/2

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	7/13/02
2	13/13/02
3	13/13/02
4	13/13/02
5	13/13/02
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49	13/13/02
50	13/13/02

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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